PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000									Application or Docket Number				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY		
TOT	AL CLAIMS		3	U			Ī	RATE	FEE		RATE	FÉE	
FOR	FOR		NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	·710.00	
TOT	TOTAL CHARGEABLE CLAIMS		3 Uminus 20=		• 14			X\$ 9=	: 1	OR	X\$18=	252	
NDERENDENT CLAIMS		15 min	15 minus 3 = 12				X40=	10000	OR	X80=	910		
MUL	TIPLE DEPEND	ENT CLAIM	PRESENT					+135=		OR	+270=		
· If th	ne difference it	n column 1 is	less than ze	ro, ente	r "0" in c	olumn 2	L	TOTAL		ÖR	TOTAL	1922	
CLAIMS AS AMENDED - PART II								SMALL E	NTITY	OR	OTHER SMALL		
MENDMENTA	Marie Care Care Care Care Care Care Care Car	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	(EST (BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
ME	Total	34	Minus		34	= /		X\$ 9=	,	OR	X\$18=		
MEN	Independent	. 15	Minus	•••	15/	=		X40=		OR	X80=		
40	FIRST PRESEN			PENDEN	T CLAIM		1	+135=	, e	OR	+270=		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	1	
d	UNIVO	(Column 1			umn 2) HEST	(Column 3)	١.		400	1 .		ADDI-	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMEN		PREV	MBER NOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONAL FEE	
DME	Total	. 34	Minus	3	3+	=		X\$ 9=		OR	X\$18=		
MEN	Independent	·)5	Minus	***	15/	1-	4	X40=		OR	X80=	<u> </u>	
	FIRST PRESE	NTATION OF	MULTIPLE DE	PENDE	NT CLAIM		ل	+135=		OR	+270=		
								TOTAL		OR	TOTA		
	į.			10 al	O	(Column 3	١١	ADDIT. FEE		_	AUDII. PE	: 	
3 F	\$	(Column 1 CLAIMS REMAINING AFTER		HIC NL PRE	umn 2) SHEST JMBER VIOUSLY ID FOR	PRESENT EXTRA	7	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	AMENDMEN	Minus			=	1	X\$ 9=		OF	X\$18=		
JEN I	Independent	•	Minus	•••		=]	X40=	 	OF	Yen-		
1		NTATION OF	MULTIPLE D	EPENDE	NT CLAI	М		-	1	1	` 	1	
			on the enteries	nlume 2 ·	vrita "O" in 4	column 3		+135=		OF	` L		
	If the entry in colu If the "Highest Nu "If the "Highest Nu The "Highest Nu	imber Privious	y Paid For IN T	HIS SPAC	E 15 1955 U	han 3 enter "3		ADDIT. FEE	: L	OF pox in	ADDIT. FE		